

State of Tennessee
Department of Commerce and Insurance
Board of Architectural and Engineering Examiners
500 James Robertson Parkway, Third Floor Nashville, TN 37243-1142
800-256-5758 615-741-3221 615-532-9410 (Fax)

### **Professional Engineer Registration by Comity**

You may fill out forms and applications online. The forms and applications have to then be printed because they must be signed and/or notarized.

### Note

Tennessee **does not grant temporary licenses**. You must be registered prior to the offering or rendering of professional engineering services.

### Law and Rules

The Law and Rules can be accessed from the Board's home page. The registration law for architects, engineers, landscape architects, and registered interior designers is found at *Tennessee Code Annotated,* Title 62, Chapter 2. You may, also, contact the Board office to request a copy of the Law and Rules, which are subject to change.

Before submitting this application, be sure you have met the minimum requirements for registration, because the application fee is **not refundable**.

### **Applicants with Foreign Degrees**

If you have a foreign undergraduate degree in engineering you must have your academic record evaluated by the Engineering Credentials Evaluation International (ECEI) of the Accreditation Board for Engineering and Technology (ABET) before submitting this application to determine if your degree is substantially equivalent to an engineering degree accredited by the ABET. You may contact ECEI at 211 E. Lombard St., Suite 357, Baltimore, MD, 21202, phone: 410-347-7738, or you can download an application from their website at <a href="ecei.org">ecei.org</a>. If ECEI has already evaluated your education, you need to request that a copy of the evaluation be sent to the Tennessee Board.

### Verification

The Board will request verification from the state board(s) where you passed the Fundamentals of Engineering and Principles and Practice of Engineering examinations. If the state board charges a fee to provide verification, a form will be sent to you to submit to the appropriate state board with your fee.

### **NCEES Council Record**

A Council Record is not required; however, if you do have one, contact the <u>National Council of Examiners for Engineering and Surveying</u> (NCEES) to have your council record submitted to the Board office. You must complete the application in its entirety including the education, experience, and reference sections of the application. You do not, however, have to request that a transcript be sent to the Board office. We will accept the references in your Council Record provided they meet our requirements (Rule 0120-1-.09) and are less than two years old as well as verification of exam and registration information.

### **Fees**

Make checks payable to the **Tennessee Department of Commerce and Insurance**.

Application Fee – **\$55** (nonrefundable fee that must accompany the application) Biennial Registration Fee – **\$140** (if approved)

You must submit the application fee with your application. To facilitate the processing of your application, the registration fee may also be paid at this time, but is not required. If you are not approved for registration, the registration fee will be refunded. If you are submitting both fees, please make the check in the amount of \$195.00. Submit the application, with fees, to the address on the application form.

### **Forms**

### (1) Application Form -

- Fill out the application form completely (on-line or after downloading it), sign it, and have it notarized. Any major modification of state approved forms may cause the Board to reject your application.
- Provide detailed information regarding your progressive engineering design work and responsibility on projects, to enable evaluation of experience. All time/experience must be accounted for whether it is related to engineering or not.

### (2) Reference Form -

- Submit five (5) references from persons acquainted with your technical ability and character.
  - Three references must be from registered engineers and
  - o References are required from both a current employer/supervisor and a past employer/supervisor (if applicable).
- References from relatives are not acceptable.
- You are responsible for sending reference forms to the persons listed on your application who will then submit them to the Board office.

### (3) Firm Disclosure Form -

If your firm does not have a valid disclosure form on file with the Board office, you will need to submit the appropriate disclosure with your application. A search for valid firms can be made by <u>clicking here</u>. See pages 13-15 for more information and firm disclosure form.

### **Review Procedure**

When your application packet is complete, it will be circulated among the Engineer members of the Board for review. The review may take up to eight weeks.

### **Pending Status**

An application that lacks required information or reflects a failure to meet any requirement will be held in a "pending" status for five (5) years from the date of the application.

### **Board Contact**

If you have questions about any of this information or about your application, call Wanda Phillips, Engineer Applications Coordinator, at 800-256-5758, 615-741-3221, or send e-mail: <a href="mailto:wanda.phillips@state.tn.us.">wanda.phillips@state.tn.us.</a>



STATE OF TENNESSEE
BOARD OF ARCHITECTURAL AND ENGINEERING EXAMINERS
DEPARTMENT OF COMMERCE AND INSURANCE
500 JAMES ROBERTSON PARKWAY, THIRD FLOOR
NASHVILLE, TENNESSEE 37243-1142

## APPLICATION FOR REGISTRATION TO PRACTICE AS A PROFESSIONAL ENGINEER

Social Security No.

Last

Type or print legibly

Full Name \_\_\_\_

Residence Address			Cit	City				
State/Zip				Co	ounty			
Residence Phone No.								
Business Affiliation								
Business Address								
State/Zip				Of	ficial Capacity			
Business Phone No.				Fa	x Number			
E-mail Address  Address for Correspondence:								
Date of Birth					City/State			
Citizen of (State/Foreign Country)				Ca	Can you speak and write English? YesNo			
I am applying for registration by: Examination and wish to be examined in the discipline of					engin	eering to	be admini	stered
	at							
date					exam location			
Do you have a disability which may rec	-				•	-	Yes	No
ComityReapplying					Council Record (optional).			
Board Review – Examination	Боага	use only-	· Please d		not write below this line.) Soard Review – Registration			
Board Member	Date	Aprvd	Dis- aprvd		Board Member	Date	Aprvd	Dis- aprvd
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IN-0168 (Rev. 1/01)		<u> </u>		<u> 11                                  </u>		<u> </u>	R	DA 2228

First

Middle

Date of Application \_\_\_\_\_

Full Name				
All information MUST comply with instruction	ns or the applicatio	on will be returned	•	
If you have ever changed your name through ma	arriage, a court acti	on, or have ever be	en known by a	ny other name,
please list name(s) and date(s) of change.				
Have you passed the Fundamentals of Engineerin	g (EIT) examinatio	n? _	YesNo	
If so, name state/territory and year				
Have you passed a written professional examinati	ion?	-	YesNo	
If so, name state/territory and year				
In what states are you registered?	(1)		6 1)	
If you have ever been registered in any states other	er than those named	above, please list th	nem	
List membership in technical or professional orga	nnizations			
Have you ever been denied registration or h surrendered as a result of disciplinary proceedings		-	nded, revoked,YesNo	
If so, name state and year				
Have you ever been convicted of a felony?		-	YesN	0
If so, name place and year				
EDUCATIONAL BACKGROUND  Name and Address of Institution	Attendance (From - To)	Date of Graduation	Major Course	Degree Received

Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
Years	Each Engagement and Degree of Responsionity	Of Supervisor
Months		
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Months		
	Years	Employment Years  Months  Years  Years  Months  Years  Years  Months  Years  Years

Full Name

EXPERIENCE

ates of mployment	Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
ii projinioni	Years	Sweet Sirgness and Sweet Sirve Sponsonity	0124001
	Months		
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	Months		

Full Name

EXPERIENCE

ates of mployment	Total Time Employment	Title of Position, Name of Employer, Location, and Nature of Each Engagement and Degree of Responsibility	Name, Title, and Address Of Supervisor
ii projinioni	Years	Sweet Sirgness and Sweet Sirve Sponsonity	0124001
	Months		
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	Months		
	Years		
	Months		
	Years		
	Months		

Full Name

EXPERIENCE

References	State of Registration	Employer Past Employer Client		Complete Address
References	Registration	Chent		Complete Address
perception and Law and Rules Affinereby make application for registration at e of Tennessee until I become replication is accurate.	as an engineer and			Attach a photograph taken in the last 12 months
ttest that I have read, reviewed, and am, Chapter 2 and the <i>Rules of the State B aminers</i> .			d, Title	HEAD AND SHOULDERS ONLY
	Signature			
ГАТЕ OF				



## STATE OF TENNESSEE BOARD OF ARCHITECTURAL AND ENGINEERING EXAMINERS DEPARTMENT OF COMMERCE AND INSURANCE 500 JAMES ROBERTSON PARKWAY, THIRD FLOOR 800-256-5758 615-741-3221 (NASHVILLE AREA)

NASHVILLE, TN 37243-1142 615-532-9410 (FAX)

### **REFERENCE**This request letter is to be completed by the applicant

	(Name and Address of Reference)	
		Re:(Print or Type Name of Applicant)
Dear		
I have 1	architecture	f Architectural and Engineering Examiners for registration to
practice	engineering landscape architecture	
Please	send the information requested on the rever	rse directly to the Board office in the envelope provided.
		Signature of Applicant)

### Board Statement to Reference:

This Board is required by law to obtain evidence of the good character and technical ability of applicants for registration as architects, engineers, and landscape architects. Statements by responsible individuals with personal knowledge of the applicant's character and qualifications will be considered as evidence. Additional information may be attached.

The Board would like to emphasize that evidence submitted on this form must not be perfunctory nor made for the mere purpose of aiding the applicant to be registered. The execution of this statement will be accepted by the Board as a deliberate act made with full knowledge of the responsibility to protect the public health, safety and welfare. It should be borne in mind that the applicant is not being considered for membership in an organization but for registration as an architect, engineer, or landscape architect, qualified to practice in Tennessee.

Since the Board cannot process this application until it receives this reference, a prompt reply will expedite our handling of the application.

THE INFORMATION YOU GIVE WILL BE TREATED IN THE STRICTEST CONFIDENCE.

	1.	. •	
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### TO BE COMPLETED BY THE REFERENCE

### THIS IS CONFIDENTIAL INFORMATION – FOR USE OF BOARD MEMBERS ONLY

1.	How long have you known to	he applicant? From	to	inclusive						
2.	Are you in any way related t	o the applicant?	What relations	ship?						
3.	What has been your connect	ion with the applicant?								
4.		For or with you, <b>give dates</b> and info Was the applicant actually in resp		e duties performed and the character and to what extent?						
5.	What is your opinion of the a	pplicant's personal integrity and g	eneral character?							
5.	Please give your estimate of	the applicant as an architect	engineer lands	cape architect.						
7.	To your knowledge, has the	applicant ever been convicted of a	felon?							
8.	Would you employ the appli	cant in a position of trust?								
9.	Is the applicant qualified to be placed in responsible charge of design or supervision of work, with full authority to change designs or specifications?									
10.										
11.	Do you recommend the appl	icant for registration?								
12.	Remarks concerning the applicant									
Tei sid	nnessee as an architect, engine e of this form.	eer or landscape architect and after	having carefully read the	cation for registration by the State of e information given on the reverse						
a.	My full name is	(to be typewritten or	nrinted)							
b.	My present employer is	(to be type written of	princu)							
d.	I am/am not a registered		ate of	_License No						
	(Date)		(Signa	ature)						
		(Address	s)							

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THE DECICED AT	)								
THE REGISTRAF	(								
I am applying for re	gistration as a/a	n							
architect	engineer		engineer in	tern	nnterio	or designer	lane	dscape archi	tect
The Tennessee Boar	d of Architectur	ral and	Engineering l	Examii	ners requires	a transcript	of my aca	demic recor	d.
I attended					from		to		
	College or Un	iversity				Date		Date	
and graduated on	wi	th			degree in				
	Date		Type of Degre	ee	0				
under the name of _									
My social security n	umber is								
т 111	C 1:			1		1.1			

I will appreciate your forwarding a transcript of my record as soon as possible to:

# STATE OF TENNESSEE DEPARTMENT OF COMMERCE AND INSURANCE BOARD OF ARCHITECTURAL AND ENGINEERING EXAMINERS 500 JAMES ROBERTSON PARKWAY, THIRD FLOOR NASHVILLE, TN 37243-1142

If there is a charge for this service, please forward a statement to me at the above address.

Sincerely,



State of Tennessee
Department of Commerce and Insurance
Board of Architectural and Engineering Examiners
500 James Robertson Parkway, Third Floor
800-256-5758 615-741-3221 (Nashville Area)

Nashville, TN 37243-1142 615-532-9410 (Fax)

### CORPORATION, PARTNERSHIP, AND FIRM DISCLOSURE

#### Law

The firm disclosure form is required of corporations, partnerships, and firms practicing or offering to practice architecture, engineering, and/or landscape architecture in the state of Tennessee in accordance with *Tennessee Code Annotated* (T.C.A.) Title 62, Chapter 2, Part 6, Sections 62-2-601 and 62-2-602. Firms offering only interior design services are not required to file a disclosure with the Board.

The firm's name must be in compliance with Tennessee's "title act"--T.C.A., Sections 62-2-101 and 62-2-105(c). (A "person" includes a corporation, firm, company, or association.) The Attorney General's office has ruled that if the firm's name uses the plural form of architect, engineer, or landscape architect, then there must be more than one Tennessee registered architect, engineer, or landscape architect in the firm (they would not, however, all have to be officers and/or principals). Furthermore, if the firm's name incorporates individuals' names in conjunction with the plural form of architect, engineer or landscape architect (for example, Smith and Jones Architects), then all of the individuals listed in the name (both Smith and Jones) must hold current and active Tennessee registration, unless documentation can be provided that the individuals are retired, deceased, etc.

The law can be accessed from our home page listed above or you may obtain a copy by contacting the Board office at the address above.

### Firm Disclosure

This form is for firm disclosure, not firm registration. No fee is required.

Only officers and principals who are employed full-time and hold active Tennessee registration can be in responsible charge of the firm's practice.

- A "principal" is considered to be an individual who has the authority to make independent design decisions. He/She is not required to be an officer in the firm.
- The person in responsible charge must be registered in the profession in which services are being offered.
- A person cannot be in responsible charge of more than one office.

### **Tennessee Branch Office Disclosure**

The Tennessee branch office form (Attachment A) should only be completed if: 1) the outof-state firm has branch offices in Tennessee, or 2) a Tennessee-based firm has more than one office in Tennessee.

- A branch office form (<u>Attachment A</u>) should be completed for each branch office (city or town) located in Tennessee from which professional design services are offered to the public.
- The registrant in responsible charge of a Tennessee branch office is not required to be an officer or principal.

### **FORMS**

The form(s) that follow these instructions may be filled out online. The forms must then be printed and signed. The Board does not accept electronic document filing of the disclosure form; the completed form must be mailed to the address above.

Please retain a completed copy for your records. Advise the Board, in writing, within sixty (60) days of any address change. Submit a new firm disclosure if reporting any other changes such as a firm/company name change, changes in registration status of principals or officers, changes in principals or officers who are designated to be in responsible charge, etc.

### **BOARD CONTACT**

If you have any questions regarding the firm disclosure requirements, please contact Jason Gilliam, Firm Disclosure Coordinator at the phone numbers listed above or by e-mail at jason.gilliam@state.tn.us.



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http://www.state.tn.us/commerce/boards/ae/index.html

### Corporation, Partnership and Firm Disclosure

Required by Tennessee Code Annotated, Section 62-2-601

Each place of business providing or offering architectural, engineering, or landscape architectural services to the public in Tennessee must file a firm disclosure form.

A. Complete one form for each type of professional design service offered to the public in Tennessee.						
	Check one:Architectu	reEngineeringLand	scape Architecture			
В.	Check one:New Discle	osureUpdate (give previous nam	ne, if different from current name):			
C.	Name of Firm					
	Doing business as					
	This firm is (please check on	e):A Business Corporation;A	A Professional Corporation; A Partnership;			
	A Sole Proprietorship; _	Other (please explain)				
	Address					
	Telephone Number	Fax Num	lber			
	Website Address (optional)	Firm's E-	mail Address			
D.		all Officers and/or Principals. Include Teon. (Attach additional sheet if necessar	ennessee registration numbers for those y)			
Ε.		nnessee registrant who is an Officer and no is registered to practice the profession	d/or Principal in responsible charge of the firm's on indicated in section A.			
	Type or Print Name	Title	TN Registration Number			
	Office Address					
	Telephone Number	Fax Number	Registrant's E-Mail Address			
	Signature		Date			
F.	List any and each branch of	fice (city or town) located in Tennesse	ee from which professional design services are			
	offered to the public. Attach	ment "A" must be completed for each lo	ocation			

Please advise the Board office, in writing at the address above, within sixty (60) days of ANY changes in the above information.